

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>meert</i>	<i>12</i>	<i>8/27/01</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>9/5</i>
FORMALITY REVIEW	<i>BZ</i>	<i>503-883</i>	<i>09-25-01</i>
RESPONSE FORMALITY REVIEW	<i>MD</i>	<i>2811</i>	<i>03/04/02</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	<i>8/27/01</i>
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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503-883

*10/26/01*  
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